

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NEW YORK JOBS COUNCIL

ADDRESS (number and street)

601 PENNSYLVANIA AVENUE NW

NORTH BUILDING SUITE 1000

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00579045

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2016

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Elizabeth Beacham White

Signature of Treasurer

Elizabeth Beacham White

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 15 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NEW YORK JOBS COUNCIL

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y Y 03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2016		72287.52
(b) Cash on Hand at Beginning of Reporting Period.....	72287.52	
(c) Total Receipts (from Line 19) .....	46000.00	46000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	118287.52	118287.52
7. Total Disbursements (from Line 31) .....	110543.84	110543.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	7743.68	7743.68
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**NEW YORK JOBS COUNCIL**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
01	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

46000.00

46000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

46000.00

46000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

46000.00

46000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

46000.00

46000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

46000.00

46000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	39418.30	39418.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	39418.30	39418.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	71125.54	71125.54
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	110543.84	110543.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110543.84	110543.84

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	46000.00	46000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46000.00	46000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	39418.30	39418.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	39418.30	39418.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NEW YORK JOBS COUNCIL**

Full Name (Last, First, Middle Initial)

## **A. Charles Page Daniels**

Mailing Address 455 East 57th Street

City  
New York

State Zip Code  
NY 10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alexander Page & Co.

Occupation  
Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

01 / 11 / 2016

Transaction ID : SA11AI.4202

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Investment Partnership**

Mailing Address 1 Airport Rd

City  
Lakewood

State Zip Code  
NJ 08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

02 / 03 / 2016

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Gerold Klauer**

Mailing Address 116 East 63rd Street

City  
New York

State Zip Code  
NY 10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Lakewater Capital

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 24 / 2016

Transaction ID : SA11AI.4197

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

36000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEW YORK JOBS COUNCIL**

Full Name (Last, First, Middle Initial)

**A. Matt Plumb**

Mailing Address 155 Coggeshall Ave

City

Newport

State

RI

Zip Code

02840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rum Bum Racing, LLC

Occupation

Motorsports Professional

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

01 / 06 / 2016

Transaction ID : SA11AI.4199

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

46000.00







**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 13

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEW YORK JOBS COUNCIL**

Full Name (Last, First, Middle Initial)

**A. In the Field LLC**Mailing Address P.O. Box 9684  
2320 Nott St. E

City Schenectady State NY Zip Code 12309

Purpose of Disbursement  
General campaign consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016**Transaction ID : SB21B.4196**

Amount of Each Disbursement this Period

7419.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►
7419.57  
39378.30

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 11 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>NEW YORK JOBS COUNCIL</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00579045	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>In the Field LLC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 02 / 2016</b>	
Mailing Address P.O. Box 9684 2320 Nott St. E				Amount <b>14996.00</b>	
City Schenectady	State NY	Zip Code 12309	Transaction ID : <b>SE.4166</b>		
Purpose of Expenditure TV Media buy and production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 29 / 2016</b>		
Name of Federal Candidate JOHN J. MR. FASO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>19</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>14996.00</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>In the Field LLC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 03 / 2016</b>	
Mailing Address P.O. Box 9684 2320 Nott St. E				Amount <b>9719.48</b>	
City Schenectady	State NY	Zip Code 12309	Transaction ID : <b>SE.4170</b>		
Purpose of Expenditure Direct Mail production		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>01 / 29 / 2016</b>		
Name of Federal Candidate JOHN J. MR. FASO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>19</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>24715.48</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>24715.48</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Elizabeth Beacham White

[Electronically Filed]

Date

MM / DD / YYYY  
**04 / 15 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>NEW YORK JOBS COUNCIL</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00579045		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span>					
Full Name of Payee <b>In the Field LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 09 / 2016</b>		
Mailing Address P.O. Box 9684 2320 Nott St. E			Amount <span style="border: 1px solid black; padding: 2px;">15992.00</span>		
City Schenectady		State NY	Zip Code 12309		
Purpose of Expenditure TV Media buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>SE.4175</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 11 / 2016</b>	
Name of Federal Candidate JOHN J. MR. FASO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">40707.48</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>In the Field LLC</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 22 / 2016</b>		
Mailing Address P.O. Box 9684 2320 Nott St. E			Amount <span style="border: 1px solid black; padding: 2px;">7996.00</span>		
City Schenectady		State NY	Zip Code 12309		
Purpose of Expenditure TV Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>SE.4179</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>02 / 22 / 2016</b>	
Name of Federal Candidate JOHN J. MR. FASO <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">48703.48</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">23988.00</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Elizabeth Beacham White</i>			Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <b>04 / 15 / 2016</b>		
[Electronically Filed]					

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 13  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>NEW YORK JOBS COUNCIL</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00579045	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> </div>	

Full Name of Payee <b>In the Field LLC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 29 / 2016</b>	
Mailing Address P.O. Box 9684 2320 Nott St. E				Amount <b>7996.00</b>	
City Schenectady	State NY	Zip Code 12309		Transaction ID : <b>SE.4182</b>	
Purpose of Expenditure TV Media Buy		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 29 / 2016</b>	
Name of Federal Candidate JOHN J. MR. FASO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <b>19</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>56699.48</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>In the Field LLC</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>03 / 30 / 2016</b>	
Mailing Address P.O. Box 9684 2320 Nott St. E				Amount <b>14426.06</b>	
City Schenectady	State NY	Zip Code 12309		Transaction ID : <b>SE.4185</b>	
Purpose of Expenditure Direct Mail production and postage		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY <b>03 / 30 / 2016</b>	
Name of Federal Candidate JOHN J. MR. FASO		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <b>19</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NY</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>71125.54</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>22422.06</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>71125.54</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Elizabeth Beacham White

[Electronically Filed]

Date

 MM / DD / YYYY  
**04 / 15 / 2016**

Signature